Place: Parklawn Building, Conference Rooms G & H, 5600 Fishers Lane, Rockville, Maryland 20857.

The meeting is open to the public.

Purpose: The Commission: (1) Advises the Secretary on the implementation of the Program, (2) on its own initiative or as the result of the filing of a petition, recommends changes in the Vaccine Injury Table, (3) advises the Secretary in implementing the Secretary's responsibilities under section 2127 regarding the need for childhood vaccination products that result in fewer or no significant adverse reactions, (4) surveys Federal, State, and local programs and activities relating to the gathering of information on injuries associated with the administration of childhood vaccines, including the adverse reaction reporting requirements of section 2125(b), and advises the Secretary on means to obtain, compile, publish, and use credible data related to the frequency and severity of adverse reactions associated with childhood vaccines, and (5) recommends to the Director of the National Vaccine Program research related to vaccine injuries which should be conducted to carry out the National Vaccine Injury Compensation Program.

Agenda: Agenda items will include, but not be limited to: a vaccine safety update from the Centers for Disease Control and Prevention and the Food and Drug Administration; a report on Children with Special Needs; a report on the National Vaccine Program; and routine Program reports.

Public comment will be permitted before noon and at the end of the full Commission meeting on March 1; and before the Commission adjourns on the second day on March 2. Oral presentations will be limited to 5 minutes per public speaker.

Persons interested in providing an oral presentation should submit a written request, along with a copy of their presentation to Mr. Jerry Anderson, Principal Staff Liaison, Division of Vaccine Injury Compensation, Bureau of Health Professions, Health Resources and Services Administration, Room 8A–35, 5600 Fishers Lane, Rockville, MD 20852; Telephone (301) 443–1533.

Requests should contain the name, address, telephone number, and any business or professional affiliation of the person desiring to make an oral presentation. Groups having similar interests are requested to combine their comments and present them through a single representative. The allocation of time may be adjusted to accommodate the level of expressed interest. The Division of Vaccine Injury Compensation will notify each presenter by mail or telephone of their assigned presentation time. Persons who do not file an advance request for presentation, but desire to make an oral statement, may sign up in Conference Rooms G & H before 10:00 a.m. on March 1 and 2. These persons will be allocated time as time permits.

Anyone requiring information regarding the Commission should contact Mr. Anderson, Division of Vaccine Injury Compensation, Bureau of Health Professions, Room 8A–35, 5600 Fishers Lane, Rockville, Maryland 20852; Telephone (301) 443–1533.

Agenda Items are subject to change as priorities dictate.

Dated: January 30, 1995.

Jackie E. Baum,

Advisory Committee Management Officer, HRSA.

[FR Doc. 95–2624 Filed 2–2–95; 8:45 am]

BILLING CODE 4160–15–P

National Institutes of Health

Division of Research Grants; Notice of Closed Meetings

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following Division of Research Grants Special Emphasis Panel (SEP) meetings:

Purpose/Agenda: To review individual grant applications
Name of SEP: Biological and Physiological Sciences
Date: February 13–14, 1995
Time: 8:30 a.m.
Place: Holiday Inn, Chevy Chase, MD
Contact Person: Dr. Sherry Dupere, Scientific Review Administrator, 5333 Westbard Ave., Room 225A, Bethesda, MD 20892, (301) 594–7097

Name of SEP: Clinical Sciences
Date: February 22, 1995
Time: 8:30 a.m.
Place: River Inn, Washington, DC
Contact Person: Dr. Mushtag Khan, Scientific Review Administrator, 5333 Westbard Ave., Room 354B, Bethesda, MD 20892, (301) 594–7168

Name of SEP: Behavioral and Neurosciences
Date: March 3, 1995
Time: 8:30 a.m.
Place: Holiday Inn, Bethesda, MD
Contact Person: Dr. Peggy McCardle, Scientific Review Administrator, 5333 Westbard Ave., Room 305, Bethesda, MD 20892, (301) 594–7293

Name of SEP: Microbiological and Immunological Sciences
Date: March 8, 1995
Time: 2:00 p.m.
Place: NIH, Westwood Building, Room 1A03 Telephone Conference
Contact Person: Dr. Garrett Keefer, Scientific Review Administrator, 5333 Westbard Ave., Room 1A03, Bethesda, MD 20892, (301) 594–7253

The meetings will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the grant review cycle.

(Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: January 27, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95–2632 Filed 2–2–95; 8:45 am]

BILLING CODE 4140–01–M

Division of Research Grants; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following Division of Research Grants Special Emphasis Panel (SEP) meeting:

Purpose/Agenda: To review individual grant applications.

Name of SEP: Microbiological and Immunological Sciences.

Date: February 3, 1995.

Time: 9:30 a.m.

Place: NIH, Westwood Building, Room 236A Telephone Conference.

Contact Person: Dr. William Branche, Scientific Review Admin., 5333 Westbard Ave., Room 236A, Bethesda, MD 20892, (301) 594–7297.

The meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the grant review cycle.

(Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: January 31, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95–2874 Filed 2–1–95; 8:45 am]

BILLING CODE 4140–01–M

Public Health Service

Agency Forms Undergoing Paperwork Reduction Act Review

Each Friday the Public Health Service (PHS) publishes a list of information collection requests under review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call

the PHS Reports Clearance Office on 202–690–7100.

The following requests have been submitted for review since the list was last published on Friday, January 27.

1. Nominations for ATSDR Community Assistance Panels—0923–0007 (Extension, no change)—This information collection mechanism allows the Agency for Toxic Substances and Disease Registry (ATSDR) to assist local communities in the nomination of members of the community to become members of Community Assistance Panels. The panels provide for a two-way exchange of information between ATSDR and the concerned public regarding the public health activities planned for the area. Respondents: Individuals or households; Number of Respondents: 1350; Number of Responses per Respondent: 1; Average Burden per Response: 0.16 hour; Estimated Annual Burden: 225 hours. Send comments to James Scanlon, Office of the Assistant Secretary for Health, Room 737–F, Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201.

2. AIDS Education and Training Centers Program: National Program and Service Record Reporting Form—0915–0154 (Revision)—Information will be obtained from AIDS Education and Training Centers to determine compliance with terms of cooperative agreements and specific project requirements. The National Program and Service Record Data Reporting Form will be used by ETCs to provide standardized reporting of project activities for Federal program monitoring. Respondents: Not-for-profit institutions; Number of Respondents: 17; Number of Responses per Respondent: 4; Average Burden per Response: 30.15 hours; Estimated Annual Burden: 2,050 hours. Send comments to James Scanlon, Office of the Assistant Secretary for Health, Room 737–F, Humphrey Building, 200 Independence Ave. SW., Washington, DC 20201.

3. National Donor Research and Education Study (REDS) 0925–0383 (Revision)—This is a mail survey of a random sample of blood donors from five Blood Centers participating in the REDS program. Data will be used to monitor the safety of the U.S. blood supply and facilitate development, evaluation and refinement of donor recruitment and education strategies. Seven additional items will be asked of a subset of respondents to guide development of the next major round of the survey. Respondents: Individuals or households. Send comments to James Scanlon, Office of the Assistant Secretary for Health, Room 737–F, Humphrey Building, 200 Independence Ave. SW., Washington, DC 20201.

Title	Number of respondents	Number of responses per respondent	Average burden per response (hours)
Currently approved	72,000	1	.33
Additional burden—5 minutes more for a subset of 15,600 donors	.....	.....	1,295

Estimated total annual burden: 25,295 hours

4. Survey of Rural Hospitals on Telemedicine—New—This survey of rural hospitals will identify all rural telemedicine systems in the United States. The information will be used to design a followup study, which will provide baseline data on the systems, a minimum data set for future studies, and evaluation methodologies for future evaluations of these systems. Respondents: Business or other for-profit, Not-for-profit institutions; Number of Respondents: 2,400; Number of Responses per Respondent: 1; Average Burden per Response: .1 hour; Estimated Annual Burden: 250 hours. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503.

5. Survey of NIH Extramural Shared Instrumentation Activities 0925–0318 (Extension, no change)—It is generally accepted that the capabilities of expensive state-of-the art biomedical instruments can be made available to the largest number of researchers in the most cost-effective manner by awarding them on the condition that they be shared. This study will examine the extent to which such instruments are shared; and how fully they are utilized, by whom, and for what. Respondents: Not-for profit institutions, Business or other for-profit; Number of Respondents: 9,870; Number of Responses Per Respondent: 1; Average Burden per Response: .286 hour; Estimated Annual Burden: 2,819 hours. Send comments to James Scanlon, Office of the Assistant Secretary for Health, Room 737–F, Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201.

6. Study of Consequences of Being Accused of Scientific Misconduct—New—42 CFR Part 50 specifies certain treatment of accused individuals, including restoration of reputation of those when allegations are not confirmed. This voluntary survey will provide background information to assure institutional compliance with regulation and other information. Respondents: Individuals or households; Number of Respondents: 112; Number of Responses per Respondent: 1; Average Burden per Response: .5 hour; Estimated Annual Burden: 56 hours. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503.

7. X-Ray Examination Program/Federal Mine Safety and Health Act 1977 (42 CFR Part 37)—0920–0020 (Reinstatement)—Information is utilized for early identification of incidence and/or treatment. Identification is followed by clinical management on miners' health, through appropriate notification of medical findings and applicable dust transfer rights. Public affected includes underground coal miners and operators, physicians and x-ray facilities. Respondents: Individuals or households, Business or other for-profit. Send comments to Shannah Koss, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503.

Title	Number of respondents	Number of responses per respondent	Average burden per response (hours)
Roentgenographic Interpretation: 42 CFR 37.40(b) ...	20,000	1.05	.02
Miner Identification Title 42 CFR 37.20	10,000	1	.3
Coal Mine Operator Plan 42 CFR 37.4(a)	500	1	.33
Facility Certification 42 CFR 37.42(c) ...	100	20	.17
Interpreting Physical Certification 42 CFR 37.51(c) ...	300	1	.05

Estimated total annual Burden: 3,940 hours.

Written comments and recommendations concerning the

proposed information collections should be sent within 30 days of this notice directly to the individual designated.

Dated: January 30, 1995.

James Scanlon,

Director, Division of Data Policy, Office of Health Planning and Evaluation.

[FR Doc. 95–2703 Filed 2–2–95; 8:45 am]

BILLING CODE 4160–17–M

Substance Abuse and Mental Health Services Administration

Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies and Laboratories That Have Withdrawn From the Program

AGENCY: Substance Abuse and Mental Health Services Administration, HHS (Formerly: National Institute on Drug Abuse, ADAMHA, HHS).

ACTION: Notice.

SUMMARY: The Department of Health and Human Services notifies Federal agencies of the laboratories currently certified to meet standards of Subpart C of Mandatory Guidelines for Federal Workplace Drug Testing Programs (59 FR 29916, 29925). A similar notice listing all currently certified laboratories will be published during the first week of each month, and updated to include laboratories which subsequently apply for and complete the certification process. If any listed laboratory's certification is totally suspended or revoked, the laboratory will be omitted from updated lists until such time as it is restored to full certification under the Guidelines.

If any laboratory has withdrawn from the National Laboratory Certification Program during the past month, it will be identified as such at the end of the current list of certified laboratories, and will be omitted from the monthly listing thereafter.

FOR FURTHER INFORMATION CONTACT: Mrs. Giselle Hersh, Division of Workplace Programs, Room 13A–54, 5600 Fishers Lane, Rockville, Maryland 20857; Tel.: (301) 443-6014.

SUPPLEMENTARY INFORMATION:

Mandatory Guidelines for Federal Workplace Drug Testing were developed in accordance with Executive Order 12564 and section 503 of Pub. L. 100–71. Subpart C of the Guidelines, ''Certification of Laboratories Engaged in Urine Drug Testing for Federal Agencies,'' sets strict standards which laboratories must meet in order to conduct urine drug testing for Federal agencies. To become certified an applicant laboratory must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification a laboratory must participate in a quarterly performance testing program plus periodic, on-site inspections.

Laboratories which claim to be in the applicant stage of certification are not to be considered as meeting the minimum requirements expressed in the HHS Guidelines. A laboratory must have its letter of certification from SAMHSA, HHS (formerly: HHS/NIDA) which attests that it has met minimum standards.

In accordance with Subpart C of the Guidelines, the following laboratories meet the minimum standards set forth in the Guidelines:

ACCU–LAB, Inc., 405 Alderson St., Schofield, WI 54476, 800–627–8200 (formerly: Alpha Medical Laboratory, Inc., Employee Health Assurance Group, ExpressLab, Inc.)

Aegis Analytical Laboratories, Inc., 624 Grassmere Park Rd., Suite 21, Nashville, TN 37211, 615–331–5300

Alabama Reference Laboratories, Inc., 543 South Hull St., Montgomery, AL 36103, 800–541–4931/205–263–5745

American Medical Laboratories, Inc., 14225 Newbrook Dr., Chantilly, VA 22021, 703–802–6900

Associated Pathologists Laboratories, Inc., 4230 South Burnham Ave., Suite 250, Las Vegas, NV 89119–5412, 702–733–7866

Associated Regional and University Pathologists, Inc. (ARUP), 500 Chipeta Way, Salt Lake City, UT 84108, 801–583–2787

Baptist Medical Center—Toxicology Laboratory, 9601 I–630, Exit 7, Little Rock, AR 72205–7299, 501–227–2783 (formerly: Forensic Toxicology Laboratory Baptist Medical Center)

Bayshore Clinical Laboratory, 4555 W. Schroeder Dr., Brown Deer, WI 53223, 414–355–4444/800–877–7016

Cedars Medical Center, Department of Pathology, 1400 Northwest 12th Ave., Miami, FL 33136, 305–325–5810

Centinela Hospital Airport Toxicology Laboratory, 9601 S. Sepulveda Blvd., Los Angeles, CA 90045, 310–215–6020

Clinical Reference Lab, 11850 West 85th St., Lenexa, KS 66214, 800–445–6917

CORNING Clinical Laboratories, 2320 Schuetz Rd., St. Louis, MO 63146, 800–288–7293 (formerly: Metropolitan Reference Laboratories, Inc.)

CORNING Clinical Laboratories, 8300 Esters Blvd., Suite 900, Irving, TX 75063, 800–526–0947 (formerly: Damon Clinical Laboratories, Damon/MetPath)

CORNING MetPath Clinical Laboratories, 1355 Mittel Blvd., Wood Dale, IL 60191, 708–595–3888 (formerly: MetPath, Inc.)

CORNING MetPath Clinical Laboratories, One Malcolm Ave., Teterboro, NJ 07608, 201–393–5000 (formerly: MetPath, Inc.)

CORNING National Center for Forensic Science, 1901 Sulphur Spring Rd., Baltimore, MD 21227, 410–536–1485 (formerly: Maryland Medical Laboratory, Inc., National Center for Forensic Science)

CORNING Nichols Institute, 7470–A Mission Valley Rd., San Diego, CA 92108–4406, 800–446–4728/619–686–3200 (formerly: Nichols Institute, Nichols Institute Substance Abuse Testing (NISAT))

Cox Medical Centers, Department of Toxicology, 1423 North Jefferson Ave., Springfield, MO 65802, 800–876–3652/417–836–3093

Dept. of the Navy, Navy Drug Screening Laboratory, Great Lakes, IL, Building 38–H, Great Lakes, IL 60088–5223, 708–688–2045/708–688–4171

Diagnostic Services Inc., dba DSI, 4048 Evans Ave., Suite 301, Fort Myers, FL 33901, 813–936–5446/800–735–5416

Doctors Laboratory, Inc., P.O. Box 2658, 2906 Julia Dr., Valdosta, GA 31604, 912–244–4468

Drug Labs of Texas, 15201 I–10 East, Suite 125, Channelview, TX 77530, 713–457–3784

DrugProof, Division of Laboratory of Pathology of Seattle, Inc., 1229 Madison St., Suite 500, Nordstrom Medical Tower, Seattle, WA 98104, 800–898–0180/206–386–2672, (formerly: Laboratory of Pathology of Seattle, Inc.)

DrugScan, Inc., P.O. Box 2969 , 1119 Mearns Rd., Warminster, PA 18974, 215–674–9310

Eagle Forensic Laboratory, Inc., 950 N. Federal Highway, Suite 308, Pompano Beach, FL 33062, 305–946–4324

ElSohly Laboratories, Inc., 5 Industrial Park Dr., Oxford, MS 38655, 601–236–2609

General Medical Laboratories, 36 South Brooks St., Madison, WI 53715, 608–267–6267

Harrison Laboratories, Inc., 9930 W. Highway 80, Midland, TX 79706, 800–725–3784/915–563–3300, (formerly: Harrison & Associates Forensic Laboratories)

HealthCare/MetPath, 24451 Telegraph Rd., Southfield, MI 48034, 800–444–0106 ext. 650 (formerly: HealthCare/Preferred Laboratories)

Holmes Regional Medical Center Toxicology Laboratory, 5200 Babcock St., N.E., Suite 107, Palm Bay, FL 32905, 407–726–9920